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B1 (Official	Form 1)(04		United	States	Bank	ruptcy	Court	90 1 0.	-		<b>T</b> 7 a 1	
			No	rthern	District	of Illino	ois				V O	luntary Petition
	Name of Debtor (if individual, enter Last, First, Middle):  Kozlowski, Scott						Name of Joint Debtor (Spouse) (Last, First, Middle):  Kozlowski, Traci					
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):						All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):						
		Sec. or Indi	vidual-Taxpa	yer I.D. (	(ITIN)/Com	plete EIN	(if more	than one, state	all)	Individual-	Taxpayer I	D. (ITIN) No./Complete EIN
	ess of Debto Aberdeen	r (No. and	Street, City, a	and State)	):	ZIP Code	Street 160 Loc	Address of Aberockport, IL	Joint Debtor deen	(No. and St	reet, City, a	and State):  ZIP Code
County of R	Residence or	of the Prin	cipal Place o	f Busines:		60441	Count <b>Wi</b> l	•	ence or of the	Principal Pl	ace of Busi	60441 iness:
Mailing Ado	dress of Deb	otor (if diffe	erent from str	eet addres	ss):		Mailir	ng Address	of Joint Debto	or (if differe	nt from str	eet address):
					_	ZIP Code						ZIP Code
Location of (if different	Principal As from street	ssets of Bus address abo	siness Debtor ove):									I
Œ	• •	Debtor	1 )	Ι		of Business			-	of Bankrup etition is Fi		Under Which
(Form of Organization) (Check one box)  ■ Individual (includes Joint Debtors)  See Exhibit D on page 2 of this form.  □ Corporation (includes LLC and LLP)  □ Partnership  □ Other (If debtor is not one of the above entities, check this box and state type of entity below.)  Chapter 15 Debtors			Sing in 1 Rail Stoo	lth Care Bugle Asset Ro 1 U.S.C. § road ckbroker nmodity Broaring Bank	siness eal Estate as 101 (51B)	defined	Chapt Chapt Chapt Chapt Chapt	er 7 er 9 er 11 er 12	☐ Control of Officer	hapter 15 F a Foreign hapter 15 F a Foreign	Petition for Recognition Main Proceeding Petition for Recognition Nonmain Proceeding	
Each country	lebtor's center y in which a fo	of main interpreted	rests:	unde	(Check box tor is a tax-ex er Title 26 of	mpt Entity a, if applicable tempt organize the United St I Revenue Co	e) cation cates	defined "incurr	are primarily cond in 11 U.S.C. § red by an individual, family, or I	nsumer debts, 101(8) as dual primarily	for	Debts are primarily business debts.
Filing Fed attach sig debtor is Form 3A.	g Fee attached e to be paid in med application unable to pay e waiver reque	installments on for the cou fee except in	heck one boy (applicable to urt's considerat n installments. able to chapter urt's considerat	individual ion certifyi Rule 10060 7 individu	ing that the (b). See Office als only). Mu	Check in a	Debtor is not if: Debtor's aggive less than all applicable A plan is bein Acceptances	a small busing regate nonco \$2,490,925 (each boxes: no filed with of the plan w	debtor as defin ness debtor as d entingent liquida amount subject this petition.	efined in 11 United debts (exo to adjustment	C. § 101(51) U.S.C. § 101 Cluding debt ton 4/01/16	
☐ Debtor e	estimates tha	t funds will t, after any	ation l be available exempt prop for distribut	erty is ex	cluded and	administrati		es paid,		THIS	S SPACE IS	FOR COURT USE ONLY
Estimated N  1- 49	Number of C. 50-99	reditors  100- 199	200-	1,000- 5,000	5,001- 10,000	10,001- 25,000	25,001- 50,000	50,001- 100,000	OVER 100,000			
Estimated A  So to \$50,000	Assets  \$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion				
Estimated L  \$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000		\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion				

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**B1** (Official Form 1)(04/13) Page 2 Name of Debtor(s): Voluntary Petition Kozlowski, Scott Kozlowski, Traci (This page must be completed and filed in every case) All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Case Number: Date Filed: Location Where Filed: - None -Date Filed: Location Case Number: Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Case Number: Date Filed: - None -District: Relationship: Judge: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) (To be completed if debtor is required to file periodic reports (e.g., I, the attorney for the petitioner named in the foregoing petition, declare that I forms 10K and 10Q) with the Securities and Exchange Commission have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice and is requesting relief under chapter 11.) required by 11 U.S.C. §342(b). ☐ Exhibit A is attached and made a part of this petition. X /s/ Jon Dowat May 6, 2015 Signature of Attorney for Debtor(s) (Date) Jon Dowat 6284536 Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and Exhibit C is attached and made a part of this petition. No. Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: ■ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).

#### **B1** (Official Form 1)(04/13)

**Voluntary Petition** 

(This page must be completed and filed in every case)

Name of Debtor(s):

Kozlowski, Scott Kozlowski, Traci

#### Signatures

#### Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Scott Kozlowski

Signature of Debtor Scott Kozlowski

X /s/ Traci Kozlowski

Signature of Joint Debtor Traci Kozlowski

Telephone Number (If not represented by attorney)

May 6, 2015

Date

#### Signature of Attorney\*

#### X /s/ Jon Dowat

Signature of Attorney for Debtor(s)

#### Jon Dowat 6284536

Printed Name of Attorney for Debtor(s)

Thinking Outide the Box, Inc.

Firm Name

40 Shuman Blvd Suite 320 Naperville, IL 60563

Address

### Email: thinkingoutside@comcast.net 630-225-9840 Fax: 630-225-7884

Telephone Number

May 6, 2015

Date

\*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

#### **Signature of Debtor (Corporation/Partnership)**

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

#### Signature of a Foreign Representative

Page 3

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

₹ 7
X

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

#### Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

	_			
٩	٧	v	•	
	١,	8		

Date

Address

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.

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B 1D (Official Form 1, Exhibit D) (12/09)

#### United States Bankruptcy Court Northern District of Illinois

_	Scott Kozlowski		a	
In re	Traci Kozlowski		Case No.	
		Debtor(s)	Chapter	7

## EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.] \_\_\_\_

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

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B 1D (Official Form 1, Exhibit D) (12/09) - Cont.	Page 2
☐ 4. I am not required to receive a credit counstatement.] [Must be accompanied by a motion for definition of the companied by a motion for definition of the companied by a motion for definition of the companied by a motion for definition of the companies are companied by a motion for definition of the companies are companies as a credit country of the companies are considered to receive a credit country of the companies are credit country of the control of the companies are credit country of the control of th	nseling briefing because of: [Check the applicable letermination by the court.]
± • ·	109(h)(4) as impaired by reason of mental illness or mental
•	nd making rational decisions with respect to financial
responsibilities.);	100(1)(1)
· · · · · · · · · · · · · · · · · · ·	109(h)(4) as physically impaired to the extent of being
· · · · · · · · · · · · · · · · · · ·	in a credit counseling briefing in person, by telephone, or
through the Internet.);	1 /
☐ Active military duty in a military co	ombat zone.
☐ 5. The United States trustee or bankruptcy requirement of 11 U.S.C. § 109(h) does not apply in	administrator has determined that the credit counseling this district.
I certify under penalty of perjury that the	information provided above is true and correct.
Signature of Debtor:	/s/ Scott Kozlowski
	Scott Kozlowski
Date: May 6, 2015	

## Case 15-16226 Doc 1 Filed 05/06/15 Entered 05/06/15 16:23:15 Desc Main Document Page 6 of 58

B 1D (Official Form 1, Exhibit D) (12/09)

#### United States Bankruptcy Court Northern District of Illinois

In re	Scott Kozlowski Traci Kozlowski		Case No.	
		Debtor(s)	Chapter	7

## EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.]

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

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3 1D (Official Form 1, Exhibit D) (12/09) - Cont.	Page 2
<u>*</u>	inseling briefing because of: [Check the applicable
statement.] [Must be accompanied by a motion for a	
± • ·	§ 109(h)(4) as impaired by reason of mental illness or mental
deficiency so as to be incapable of realizing	and making rational decisions with respect to financial
responsibilities.);	
☐ Disability. (Defined in 11 U.S.C. §	109(h)(4) as physically impaired to the extent of being
unable, after reasonable effort, to participate	in a credit counseling briefing in person, by telephone, or
through the Internet.);	
☐ Active military duty in a military c	combat zone.
☐ 5. The United States trustee or bankruptcy requirement of 11 U.S.C. § 109(h) does not apply in	administrator has determined that the credit counseling this district.
I certify under penalty of perjury that the	information provided above is true and correct.
Signature of Debtor:	/s/ Traci Kozlowski
C	Traci Kozlowski
Date: May 6, 2015	

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B6 Summary (Official Form 6 - Summary) (12/14)

## **United States Bankruptcy Court Northern District of Illinois**

In re	Scott Kozlowski,		Case No.	
	Traci Kozlowski			
•		Debtors	Chapter	7
			•	

#### **SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	375,050.00		
B - Personal Property	Yes	3	81,239.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		516,908.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	11		262,240.12	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	2			5,680.09
J - Current Expenditures of Individual Debtor(s)	Yes	2			6,011.00
Total Number of Sheets of ALL Schedu	ıles	24			
	T	otal Assets	456,289.00		
			Total Liabilities	779,148.12	

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B 6 Summary (Official Form 6 - Summary) (12/14)

## **United States Bankruptcy Court Northern District of Illinois**

In re	Scott Kozlowski,		Case No.	
	Traci Kozlowski			
		Debtors	Chapter	7

#### STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	8,665.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	8,665.00

#### State the following:

Average Income (from Schedule I, Line 12)	5,680.09
Average Expenses (from Schedule J, Line 22)	6,011.00
Current Monthly Income (from Form 22A-1 Line 11; OR, Form 22B Line 14; OR, Form 22C-1 Line 14)	9,402.80

#### State the following:

Total from Schedule D, "UNSECURED PORTION, IF ANY"     column		116,869.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		262,240.12
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		379,109.12

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B6A (Official Form 6A) (12/07)

In re	Scott Kozlowski,	Case No.
	Traci Kozlowski	

#### Debtors

#### **SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Single family home - 16015 Aberdeen Drive,		-	375,050.00	480,003.00
Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption	Amount of Secured Claim

Sub-Total > **375,050.00** (Total of this page)

Total > **375,050.00** 

(Report also on Summary of Schedules)

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B6B (Official Form 6B) (12/07)

In re	Scott Kozlowski,	Case No.
	Traci Kozlowski	

Debtors

#### **SCHEDULE B - PERSONAL PROPERTY**

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	Type of Property	N O Description and Location of Property E	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1.	Cash on hand	X		
2.	Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.	Checking Account - BMO Harris Bank	-	2,000.00
3.	Security deposits with public utilities, telephone companies, landlords, and others.	x		
4.	Household goods and furnishings, including audio, video, and computer equipment.	1 Kitchen Table and Chairs, 3 Childrens Bedroom Sets, 1 Master Bedroom Set, 2 Couches, 1 Love Seat, 3 Televisions	-	1,000.00
		Office Furnature and Computer	-	1,000.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	x		
6.	Wearing apparel.	Work Clothing	-	600.00
		Childrens Clothing	-	600.00
7.	Furs and jewelry.	x		
8.	Firearms and sports, photographic, and other hobby equipment.	x		
9.	Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X		
10.	Annuities. Itemize and name each issuer.	X		
		(Tota	Sub-Total of this page)	al > <b>5,200.00</b>

**2** continuation sheets attached to the Schedule of Personal Property

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B6B (Official Form 6B) (12/07) - Cont.

In	re Scott Kozlowski, Traci Kozlowski			Case No.	
		SCHED	Debtors  ULE B - PERSONAL PROPEI  (Continuation Sheet)	RTY	
	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	х			
12.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	Wells F	Fargo 401(k)	-	50,000.00
13.	Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14.	Interests in partnerships or joint ventures. Itemize.	X			
15.	Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
16.	Accounts receivable.	x			
17.	Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
	Other liquidated debts owed to debtor including tax refunds. Give particulars.				
19.	Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
				Sub-Tota (Total of this page)	al > 50,000.00

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B6B (Official Form 6B) (12/07) - Cont.

In re	Scott Kozlowski,
	Traci Kozlowski

#### Debtors

#### **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
22.	Patents, copyrights, and other intellectual property. Give particulars.	X			
23.	Licenses, franchises, and other general intangibles. Give particulars.	X			
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25.	Automobiles, trucks, trailers, and	20	012 Dodge Challenger - 19,000 miles	-	17,667.00
	other vehicles and accessories.	20	010 Toyota Prius - 100,000 Miles	-	7,639.00
		20	002 Saturn - 100,000 miles	-	733.00
26.	Boats, motors, and accessories.	X			
27.	Aircraft and accessories.	X			
28.	Office equipment, furnishings, and supplies.	X			
29.	Machinery, fixtures, equipment, and supplies used in business.	X			
30.	Inventory.	X			
31.	Animals.	X			
32.	Crops - growing or harvested. Give particulars.	X			
33.	Farming equipment and implements.	X			
34.	Farm supplies, chemicals, and feed.	X			
35.	Other personal property of any kind not already listed. Itemize.	X			

Sub-Total > (Total of this page)

26,039.00

Total >

81,239.00

Sheet **2** of **2** continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

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B6C (Official Form 6C) (4/13)

In re	Scott Kozlowski,	Case No.
	Traci Kozlowski	

Debtors

#### SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:

(Check one box)

11 U.S.C. §522(b)(2)

11 U.S.C. §522(b)(3)

Check if debtor claims a homestead exemption that exceeds \$155,675. (Amount subject to adjustment on 4/1/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.)

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Checking, Savings, or Other Financial Accounts, C			
Checking Account - BMO Harris Bank	735 ILCS 5/12-1001(b)	2,000.00	2,000.00
Household Goods and Furnishings 1 Kitchen Table and Chairs, 3 Childrens Bedroom Sets, 1 Master Bedroom Set, 2 Couches, 1 Love Seat, 3 Televisions	735 ILCS 5/12-1001(b)	1,000.00	1,000.00
Office Furnature and Computer	735 ILCS 5/12-1001(b)	1,000.00	1,000.00
Wearing Apparel Work Clothing	735 ILCS 5/12-1001(a)	600.00	600.00
Childrens Clothing	735 ILCS 5/12-1001(a)	600.00	600.00
Interests in IRA, ERISA, Keogh, or Other Pension of Wells Fargo 401(k)	or Profit Sharing Plans 735 ILCS 5/12-1006	50,000.00	50,000.00
<u>Automobiles, Trucks, Trailers, and Other Vehicles</u> 2010 Toyota Prius - 100,000 Miles	735 ILCS 5/12-1001(c)	317.00	7,639.00
2002 Saturn - 100,000 miles	735 ILCS 5/12-1001(c)	733.00	733.00

Total: 56,250.00 63,572.00

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B6D (Official Form 6D) (12/07)

In re	Scott Kozlowski,	Case No.
	Traci Kozlowski	

**Debtors** 

#### SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R		DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGEN	an_	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. xxxxxxxx4079  Ally Financial 200 Renaissance Ctr Detroit, MI 48243		w	Opened 10/31/12 Last Active 3/04/15 2012 Dodge Challenger - 19,000 miles	Т	DATED			
Account No. xxxx7450	╀	L	Value \$ 17,667.00  Opened 3/01/07 Last Active 2/28/15	1			29,583.00	11,916.00
Green Tree Servicing L Po Box 6172 Rapid City, SD 57709		н	Single family home - 16015 Aberdeen Drive, Lockport, IL 60441					
			Value \$ 375,050.00				365,735.00	0.00
Account No. xxxx8152  Green Tree Servicing L Po Box 6172 Rapid City, SD 57709		н	Opened 5/01/06 Last Active 2/28/15 Single family home - 16015 Aberdeen Drive, Lockport, IL 60441					
	4	╄	Value \$ 375,050.00	╀			114,268.00	104,953.00
Account No. xxxxxxxxxxxxxx0001  Toyota Motor Credit 1111 W 22nd St Ste 420 Oak Brook, IL 60523		w	Opened 4/01/10 Last Active 2/03/15 2010 Toyota Prius - 100,000 Miles					
			Value \$ 7,639.00	1			7,322.00	0.00
continuation sheets attached	_		(Total of t	Subt			516,908.00	116,869.00
			(Report on Summary of So	_	ota lule	-	516,908.00	116,869.00

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B6E (Official Form 6E) (4/13)

In re	Scott Kozlowski,	Case No.
	Traci Kozlowski	
_		Debtors

#### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

Check this box it debtor has no creditors holding unsecured priority claims to report on this schedule E.
TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)
Domestic support obligations  Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relation of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
☐ Extensions of credit in an involuntary case
Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of trustee or the order for relief. 11 U.S.C. § 507(a)(3).
☐ Wages, salaries, and commissions
Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sale representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).
☐ Contributions to employee benefit plans
Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of busine whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).
☐ Certain farmers and fishermen  Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
□ Deposits by individuals
Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. \$ 507(a)(7).
☐ Taxes and certain other debts owed to governmental units
Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).
☐ Commitments to maintain the capital of an insured depository institution  Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federa Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).
☐ Claims for death or personal injury while debtor was intoxicated
Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

<sup>\*</sup> Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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B6F (Official Form 6F) (12/07)

In re	Scott Kozlowski, Traci Kozlowski		Case No.	
_		Debtors		

#### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE,	C O D E B T	H H W	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM	CONTINGE	UNLIC	D I S P II	
AND ACCOUNT NUMBER (See instructions above.)	T O R	C	IS SUBJECT TO SETOFF, SO STATE.	N G E N	Ū I D A T	E D	AMOUNT OF CLAIM
Account No. xx1563			3/2014 Medical Debt	Ť	T E D		
Academic Endocrine 2001 Gary Ave.		J					
Suite 240		ľ					
Wheaton, IL 60187							50.00
Account No. xxxx0821		┝	Opened 12/01/11 Last Active 4/12/13		-	$\vdash$	50.00
			Credit card purchases				
ARS National Services Inc Re: Citibank, N.A. Citi Mastercard		W					
P.O. Box 463023		'					
Escondido, CA 92046							
							880.97
Account No. xxxx3484			Credit card purchases				
ARS National Services Inc							
Re: Chase Bank, N.A.		J					
P.O. Box 463023 Escondido, CA 92046							
,							1,974.53
Account No. xxx6563			Opened 6/01/14				
Atg Credit			Collection Attorney Naperville Radiologists				
1700 W Cortland St Ste 2		Н					
Chicago, IL 60622							
							308.00
10 continuation sheets attached			(Total of	Sub			3,213.50

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In re	Scott Kozlowski,	Case No.
_	Traci Kozlowski	

	10		should Wife think as Community	10	1	L	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Hu H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	L Q U	IF	AMOUNT OF CLAIM
Account No. xxx0848			Opened 5/01/14	Т	T E D		
Atg Credit 1700 W Cortland St Ste 2 Chicago, IL 60622		н	Collection Attorney Joliet Radiological S.C.				47.00
Account No. xxxxxxxxxxxx2456	$\vdash$		Opened 12/07/11 Last Active 1/18/13				47.00
Bmo Harris Bank P.o. Box 1111 Madison, WI 53701		w	Credit Card				
							7,728.00
Account No. xxxxxxxx9747  Cach Llc/Square Two Financial Attention: Bankruptcy 4340 South Monaco St. 2nd Floor Denver, CO 80237		w	Opened 11/01/13 Collection Attorney Ge Capital Retail Bank				682.00
Account No. xxxxxxxx0019			Opened 4/01/07 Last Active 9/03/10				
Capital One Na Attn: General Correspondence Po Box 30285 Salt Lake City, UT 84130		J	Agriculture				69,827.00
Account No. xxxxxxxx9955	$\mathbf{f}$		Med1 02 Premier Dermatology		T		<u> </u>
Cda/pontiac Attn:Bankruptcy Po Box 213 Streator, IL 61364		w					605.00
Sheet no1 of _10 _ sheets attached to Schedule of				Sub	tota	1	000.00
Creditors Holding Unsecured Nonpriority Claims			(Total of				78,889.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Scott Kozlowski,	Case No.
	Traci Kozlowski	

	1.			1 -	. 1	T-	1
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Hu: H C	sband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C C N T I N G E N		I S P U T E	AMOUNT OF CLAIM
Account No. xxx0658	╛		04/16/2014	T	E		
Center Pediatric Gastroenterology 777 Oakmont Lane Ste 1600 Westmont, IL 60559		J	Medical Services		D		79.00
Account No. xxxxxxxxxxxx3407	╁		Opened 12/01/94 Last Active 1/21/11		+	+	78.00
Chase Card 201 N. Walnut St//De1-1027 Wilmington, DE 19801		н	Credit Card				
							5,880.00
Account No. xxxxxxxxxxxx2629  Chase Card P.o. Box 15298 Wilmington, DE 19850		w	Opened 12/01/11 Last Active 5/22/13 Credit Card				555.00
Account No. xxxxxxxxxxxx1201	✝		Opened 8/01/11 Last Active 3/15/13		$\dagger$	$\dagger$	
ChaseHealthAdvance Az1-5734 Po Box 71 Phoenix, AZ 85001		w	Charge Account				1,974.00
Account No. xxxxxxxxxxxx0119	╁		Opened 3/01/98 Last Active 8/19/10	+	+	+	.,
Citibank/The Home Depot Citicorp Credit Srvs/Centralized Bankrup Po Box 790040 Saint Louis, MO 63179		н	Charge Account				1,202.00
Sheet no. <b>2</b> of <b>10</b> sheets attached to Schedule of	_	<u> </u>		Sub	tot	al	
Creditors Holding Unsecured Nonpriority Claims			(Total				9,689.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Scott Kozlowski,	Case No.
	Traci Kozlowski	

	С	ш.,	sband, Wife, Joint, or Community	1	U	D	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	ODEBTOR	H W H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	N		AMOUNT OF CLAIM
Account No. xxx2661			Opened 10/01/14	Т			
Creditors Collection B 755 Almar Pkwy Bourbonnais, IL 60914		w	Collection Attorney Presence St. Joseph Medical Ce		D		652.00
Account No. xxx0932	╁		Opened 5/01/14	+		H	
Creditors Collection Bureau, Inc 755 Almar Pkwy Bourbonnais, IL 60914		н	Collection Attorney Presence St. Joseph Medical Ce				
							267.40
Account No. xxxxxx-xx6170  Creditors Discount and Audit Co. 415 East Main Street Streator, IL 61364		J	09/17/2014 Medical Services				60.00
Account No. xxx7964	╁		Med1 02 Presence St Joseph Medical C				
Credtrs Coll 755 Almar Pkwy Bourbonnais, IL 60914		Н					117.00
Account No. xxxxxxxxxxxx2992	╁		Opened 11/01/11 Last Active 8/08/14	+		$\vdash$	
Discover Fin Svcs Llc Po Box 15316 Wilmington, DE 19850		w	Credit Card				2,218.00
Sheet no. <b>3</b> of <b>10</b> sheets attached to Schedule of		_		Sub	tota	ıl	
Creditors Holding Unsecured Nonpriority Claims			(Total of				3,314.40

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B6F (Official Form 6F) (12/07) - Cont.

In re	Scott Kozlowski,	Case No
_	Traci Kozlowski	

CDEDITORIS NAME	С	Hu	sband, Wife, Joint, or Community	C	U	D	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	ODEBTOR	H&JC	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.		L I Q	I S P U T E D	AMOUNT OF CLAIM
Account No. xx3785			03/21/2014	Т	T E D		
DuPage Valley Anesthisia PO Box 3872 Carol Stream, IL 60132		J	Medical Services				113.40
Account No. xxxx3875	╀		Opened 5/01/14	+	┝	┝	110.40
Harvard Collection Harvard Collection Services 4839 N Elston Avenue Chicago, IL 60630	-	н	Collection Attorney Laboratory Path Diagnostics				182.00
Account No. xxxxxxxxx6061	╀		02/13/2014	-			182.00
Health Care Centers of Morris Hosp. Central Billing Office 25259 S. Reed St. Channahon, IL 60410	_	J	Medical Services				60.00
Account No. xxxx # xxxxxx xx6200	t		7/2011				
Homer Industries Inc. 13920 Archer Ave. Lockport, IL 60441		J	Judgement				2,872.48
Account No. xxx6013	╁		1/2014	+	┝	_	2,3.2.40
Joliet Open MRI PO Box 843 Wheaton, IL 60187		J	Medical Debt				633.00
Sheet no. 4 of 10 sheets attached to Schedule of	_			Sub	tota	ıl	
Creditors Holding Unsecured Nonpriority Claims			(Total of	this	pag	ge)	3,860.88

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In re	Scott Kozlowski,	Case No.
_	Traci Kozlowski	

	Tc	L.,.	should Wife laint or Community	Lc	U	D	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	ŀ	SPUTED	AMOUNT OF CLAIM
Account No. x0833			10/13/2010	Т	T E		
Joliet Radiological SC 36910 Treasury Center Chicago, IL 60694		J	Medical Services		D		47.40
Account No. xxx8636	╁		Med1 02 Pathology Consultants Inc				77.40
Komyatte & Casbon Attn: Collections Department 9650 Gordon Drive Highland, IN 46322		н					
							56.00
Account No. xxxxxxxx614.1  Laboratory and Pathology Diagnostic  Dept 4387  Carol Stream, IL 60122		J	04/16/2014 Medical Services				182.04
Account No. xxxxxxxxxxxx1844	╁		Opened 8/01/10				
Lvnv Funding Llc Po Box 10497 Greenville, SC 29603		н	Factoring Company Account Credit One Financial Solutions				
							41,056.00
Account No. xxxxxxxxxxxx2960  Lvnv Funding Llc Po Box 10497 Greenville, SC 29603		н	Opened 3/01/11 Factoring Company Account Chase Bank Usa N.A.				8,739.00
Sheet no. <b>5</b> of <b>10</b> sheets attached to Schedule of		<u> </u>	<u> </u>	Subt	tota	ıl	
Creditors Holding Unsecured Nonpriority Claims			(Total of t				50,080.44

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In re	Scott Kozlowski,	Case No.
	Traci Kozlowski	

	С	Hus	sband, Wife, Joint, or Community	Тс	Ιυ	D	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	0 0	± ≥ ¬ ∪	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONFINGEN	L I Q	I S P U T F	AMOUNT OF CLAIM
Account No. Kozlowski			2014 Madii ad Dala	٦т	T E D		
M3 Financial Services Re: Univ. Cicago Medicine PO Box 7230 Westchester, IL 60154		J	Medical Debt				429.44
Account No. xxxxxxxx7113	H		Opened 7/01/14	+		H	
Med Business Bureau Po Box 1219 Park Ridge, IL 60068		Н	Collection Attorney Med1 02 Dupage Valley Anes Ltd				113.00
Account No. xxx0779	H		09/12/2014				110.00
Medical Recovery Specialists LLC 2250 Devon Ave Ste 352 Des Plaines, IL 60018		J	Collecting for Edward Hospital and Health Services				898.66
Account No. xxxxxxx8491	Н		09/23/2014	+			
MiraMed Revenue Group Dept 77304 Po Box 77000 Detroit, MI 48277		J	Medical Services				656.17
Account No. xxxxxxx8491	H		02/13/2014	+	$\vdash$	$\vdash$	
Morris Hospital 150 West High Street Morris, IL 60450		J	Medical Services				656.17
Sheet no. 6 of 10 sheets attached to Schedule of				Sub	tota	1	
Creditors Holding Unsecured Nonpriority Claims			(Total of				2,753.44

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B6F (Official Form 6F) (12/07) - Cont.

In re	Scott Kozlowski,	Case No.
_	Traci Kozlowski	

				_		_	_
CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community		U N L	P	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER	CODEBTOR	H W J	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM	CONTI	LOI	S P U T E	AMOUNT OF CLAIM
(See instructions above.)	O R	С	IS SUBJECT TO SETOFF, SO STATE.	NGENT	חו	חו	AMOUNT OF CLAIM
Account No. xx9221			1/2014	Т	A T E D		
Naperville Radiologists, S.C.		١.	Medical Debt		D	H	1
6910 S. Madison Street Willowbrook, IL 60527		J					
							308.00
Account No. xx4540			2014 Medical Debt				
Nationwide Credit & Collections							
Re: Meridian Medical Assoc. PO Box 3159		J					
Oak Brook, IL 60522-3159							
						L	67.74
Account No. xxxx7499			Opened 1/01/04 Last Active 11/13/14 Educational				
Nelnet Lns			Luucationai				
Po Box 1649		Н					
Denver, CO 80201							
							7,295.00
Account No. xxxx7399			Opened 1/01/04 Last Active 11/13/14 Educational				
Nelnet Lns			Luucationai				
Po Box 1649		Н					
Denver, CO 80201							
							1,370.00
Account No. xxxxxx1-110			1/2014 Medical Debt				
Pathology Consultants, Inc			modical Bobt				
PO Box 30309		J					
Charleston, SC 29417-0309							
						floor	56.13
Sheet no7 of _10_ sheets attached to Schedule of				Sub			9,096.87
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	paş	ge)	0,000.57

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B6F (Official Form 6F) (12/07) - Cont.

In re	Scott Kozlowski,	Case No.
_	Traci Kozlowski	

	1.			_		_	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Hu H W J C	sband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.		DZ1_QD_D∢⊢Ш	S	AMOUNT OF CLAIM
Account No. xxxx2461	1		Med1 02 Morris Hospital	1	ED		
Pellettieri 991 Oak Creek Dr Lombard, IL 60148		н			ם		656.00
Account No. xxxxxxxxxxx3885	╁		08/2011				
PNC PO Box 1820 Dayton, OH 45401		J	Line of Credit				
							94,044.97
Account No. xxxxxxxxxxxxx0918  Portfolio Recovery Attn: Bankruptcy Po Box 41067 Norfolk, VA 23541		н	Opened 4/01/12 Factoring Company Account Ge Capital Retail Bank				1,697.00
Account No. xxxxxxxxxxxx8215  Portfolio Recovery Attn: Bankruptcy Po Box 41067 Norfolk, VA 23541	-	w	Opened 11/01/14 Factoring Company Account Capital One Bank Usa N.A.				955.00
Account No. xxxxxxxxxxx4539  Portfolio Recovery Attn: Bankruptcy Po Box 41067 Norfolk, VA 23541		w	Opened 12/01/14 Factoring Company Account Synchrony Bank				
							245.00
Sheet no. <b>8</b> of <b>10</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			S (Total of th		ota pag		97,597.97

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B6F (Official Form 6F) (12/07) - Cont.

In re	Scott Kozlowski,	Case No
_	Traci Kozlowski	

	С	Hu	sband, Wife, Joint, or Community	Тс	U	D	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	ODEBTOR	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONFINGEN	L I Q	I F	AMOUNT OF CLAIM
Account No. 2392			8/2013	Т	T E D		
Presence St. Joseph Medical Center Patient Finanical Services 1643 Lewis Ave., Ste 203 Billings, MT 59102-4151		J	Medical Debt				117.40
Account No. <b>7929</b>	H		12/2013				
Presence St. Joseph Medical Center Patient Finanical Services 1643 Lewis Ave., Ste 203 Billings, MT 59102-4151		J	Medical Debt				150.00
Account No. 7818	H		5/2014	+	H		
Presence St. Joseph Medical Center Patient Finanical Services 1643 Lewis Ave., Ste 203 Billings, MT 59102-4151		J	Medical Debt				652.42
Account No. xxxxxxxxxxx7559	f		Opened 9/01/96 Last Active 10/03/10		H		
Sears/cbna Po Box 6283 Sioux Falls, SD 57117		н	Credit Card				677.00
Account No. xxxx # xxxxxxxx4007	$\vdash$		2008	+	╀	$\vdash$	677.00
Shorewood Home & Auto Inc. 1002 W. Jefferson St. Shorewood, IL 60404		J	Judgement				293.40
Sheet no. <b>9</b> of <b>10</b> sheets attached to Schedule of			<u> </u>	Sub	tota	ıl	
Creditors Holding Unsecured Nonpriority Claims			(Total of				1,890.22

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B6F (Official Form 6F) (12/07) - Cont.

In re	Scott Kozlowski,	Case No	)
	Traci Kozlowski	_	

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)  Account No. xxxxx2884  Silver Cross Hospital 7008 Solution Center Chicago, IL 60677	CODEBTOR	Hw J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.  04/072015  Medical Services	CONTINGENT	ŀ	DISPUTED	AMOUNT OF CLAIM
Account No. xxxxx5781  Td Bank Usa/targetcred Po Box 673 Minneapolis, MN 55440		w	Opened 11/01/08 Last Active 7/06/13 Credit Card				339.00
Account No. xxxx4713  The Affiliated Group I Po Box 7739 Rochester, MN 55903		w	Opened 8/01/14 Collection Attorney Physicians Immediate Care Llc				78.00
Account No. xx4782  University of Chi Medicine 15965 Collections Center Dr. Chicago, IL 60693-0159	-	J	2014 Medical Debt				29.04
Account No. x-xxx3334  Univrsty of Chicago Physicans Group 75 Remittance Dr., Ste 1385 Chicago, IL 60675-1385	-	Н	2014 Medical Debt				180.20
Sheet no. <b>_10</b> _ of <b>_10</b> _ sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			S (Total of t	Subt			1,854.40
			(Report on Summary of Sc		Γota lule		262,240.12

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B6G (Official Form 6G) (12/07)

In re	Scott Kozlowski,	Case No.
	Traci Kozlowski	

Debtors

#### SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

■ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract. Case 15-16226 Doc 1 Filed 05/06/15 Entered 05/06/15 16:23:15 Desc Main Document Page 29 of 58

B6H (Official Form 6H) (12/07)

In re	Scott Kozlowski,	Case No.
	Traci Kozlowski	

Debtors

#### **SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

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Debte	or 1	Scott Kozlo	wski	_	
Debte (Spous	or 2 se, if filing)	Traci Kozlo	wski		
Unite	ed States Bankrupto	cy Court for the	e: NORTHERN DISTRIC	CT OF ILLINOIS	
Case (If know	e number wn)			-	Check if this is:  An amended filing  A supplement showing post-petition chapte 13 income as of the following date:
Off	icial Form	B 6I			MM / DD/ YYYY
Sc	hedule I: Y	our Inc	ome		12/
suppl spous attach	lying correct infor se. If you are sepa n a separate sheet	mation. If you trated and you to this form.	sible. If two married peo are married and not fili ar spouse is not filing w	ing jointly, and your spouse is livith you, do not include informati	and Debtor 2), both are equally responsible for ring with you, include information about your on about your spouse. If more space is needed d case number (if known). Answer every questi
suppl spous attach Part 1.	lying correct infor se. If you are sepa n a separate sheet	mation. If you rated and you to this form.	sible. If two married peo are married and not fili ar spouse is not filing w	ing jointly, and your spouse is livith you, do not include informati	ring with you, include information about your on about your spouse. If more space is needed
suppl spous attach Part 1.	lying correct inforse. If you are sepan a separate sheet  1: Describe  Fill in your emploinformation.  If you have more the	mation. If you arated and you to this form.  Employment yment nan one job,	sible. If two married ped are married and not fili ar spouse is not filing w On the top of any addit	ing jointly, and your spouse is livith you, do not include informational pages, write your name and	ring with you, include information about your on about your spouse. If more space is needed to case number (if known). Answer every question
suppl spous attach Part 1.	lying correct infor se. If you are sepan a separate sheet  1: Describe  Fill in your emploinformation.	mation. If you arated and you arated and you arated and you are to this form.  Employment yment  nan one job, bage with	sible. If two married peo are married and not fili ar spouse is not filing w	ing jointly, and your spouse is livith you, do not include informational pages, write your name and	ving with you, include information about your on about your spouse. If more space is needed a case number (if known). Answer every question about your spouse Debtor 2 or non-filing spouse
suppl spous attach Part 1.	lying correct inforse. If you are sepan a separate sheet  1: Describe  Fill in your emploinformation.  If you have more thattach a separate p	mation. If you arated and you arated and you arated and you are to this form.  Employment yment  nan one job, bage with	sible. If two married ped are married and not fili ar spouse is not filing w On the top of any addit	ing jointly, and your spouse is livith you, do not include informational pages, write your name and  Debtor 1  Employed	ving with you, include information about your on about your spouse. If more space is needed a case number (if known). Answer every question better 2 or non-filing spouse  Employed
suppl spous attach Part 1.	lying correct inforse. If you are sepan a separate sheet  1: Describe  Fill in your emploinformation.  If you have more thattach a separate pinformation about a	mation. If you trated and you to this form.  Employment yment han one job, bage with additional seasonal, or	sible. If two married per are married and not fili ir spouse is not filing w On the top of any addit	Debtor 1  Employed  Not employed	ving with you, include information about your on about your spouse. If more space is needed a case number (if known). Answer every question better 2 or non-filing spouse  Employed  Not employed
suppl spous attach Part 1.	lying correct inforse. If you are sepan a separate sheet  1: Describe  Fill in your emploinformation.  If you have more the attach a separate prinformation about a employers.  Include part-time, separate princes are princes and the separate princes are princes and the separate princes are princes.	mation. If you trated and you to this form.  Employment transport of the transport of the transport of the transport of the transport of transport of the transport of transpo	sible. If two married per are married and not fili r spouse is not filing w On the top of any addit  Employment status  Occupation	Debtor 1  Employed  Not employed  Director of Purchasing	Debtor 2 or non-filing spouse  Employed  Not employed  Part Time School Aide

**Give Details About Monthly Income** 

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1

0.00

+\$

\$

For Debtor 2 or non-filing spouse

652.80

652.80

0.00

List monthly gross wages, salary, and commissions (before all payroll 8,750.00 deductions). If not paid monthly, calculate what the monthly wage would be. 2. Estimate and list monthly overtime pay. 3. 3. Calculate gross Income. Add line 2 + line 3. 8,750.00

Schedule I: Your Income Official Form B 6I page 1

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Deb Deb	tor 1 tor 2	Scott Kozlowski Traci Kozlowski		Case n	umber ( <i>if known</i> )				
	Cop	y line 4 here	4.	For I	Debtor 1 8,750.00		Debtor 2 or a-filing spous 652.8		
_					,				
5.	5a. 5b. 5c. 5d. 5e. 5f. 5g. 5h.	all payroll deductions:  Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance Domestic support obligations Union dues Other deductions. Specify:	5a. 5b. 5c. 5d. 5e. 5f. 5g. 5h.+	\$ \$ \$ \$ \$	2,433.11 0.00 437.50 0.00 770.96 0.00 0.00	\$ \$ \$ \$ \$	0.0 0.0 0.0	00 00 00 00 00	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	3,641.57	\$	81.	14_	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	5,108.43	\$	571.0	66	
8.	8b. 8c. 8d. 8e. 8f.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  Interest and dividends  Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  Unemployment compensation  Social Security  Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  Pension or retirement income	_ 8f. 8g.	\$ \$ \$ \$ \$ \$	0.00 0.00 0.00 0.00 0.00	\$ \$ \$ \$ \$ \$ \$	0.0 0.0 0.0 0.0 0.0	00 00 00 00	
	8h.	Other monthly income. Specify:	8h.+	\$	0.00	\$	0.0	00	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	0	.00	
10.		culate monthly income. Add line 7 + line 9.  the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	0. \$_	5	+ \$_	ţ	571.66 = \$	5,0	680.09
11.	Inclu othe	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your prince friends or relatives. In the include any amounts already included in lines 2-10 or amounts that are not acify:	depen	•	,	•			0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailies					12. \$ <b>Com</b>	bined	
13.	Do :	you expect an increase or decrease within the year after you file this form?  No.  Yes. Explain:	?				mon	thly in	come

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ΕШ	in this informa	ation to identify yo	our case:					
						01		
Deb	otor 1	Scott Kozlov	/SKi			_	eck if this is:  An amended filing	
Deb	otor 2	Traci Kozlow	<i>r</i> eki				ŭ	wing post-petition chapter
	ouse, if filing)	Traci Roziov	- SKI					f the following date:
Uni	ted States Bankr	ruptcy Court for the:	NORTH	ERN DISTRICT OF ILLIN	OIS		MM / DD / YYYY	
Cas	se number					п	A separate filing fo	or Debtor 2 because Debto
	known)						2 maintains a sepa	
0	fficial Fo	orm B 6J						
		J: Your I	_ Evnon	200				40/4:
				ISES If two married people a	ro filing togother b	oth are e	gually raspansible	for cumplying correct
info	ormation. If m		eded, atta	ch another sheet to this				
Pai	rt 1: Desci	ribe Your House	hold					
1.	Is this a joir	nt case?						
	☐ No. Go to	o line 2.						
	Yes. Doe	es Debtor 2 live	in a separa	ate household?				
	■ N	lo						
	□Y	es. Debtor 2 mus	st file a sep	parate Schedule J.				
2.	Do you hay	e dependents?	□ No					
۷.	•	•		Fill and this information for	Daman danska nalasi		Daman dan da	Dana damandant
	Do not list D and Debtor 2		Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state						_	□ No
	dependents'				Daughter		10	■ Yes
								□ No
					Daughter		14	■ Yes
								□ No
					Daughter		18	Yes
								□ No
3.	Do your ox	penses include	_				<del></del>	☐ Yes
ა.		penses include of people other t	han	No				
	yourself an	d your depende	nts? ⊔	Yes				
Pai	rt 2: Estim	nate Your Ongoi	na Monthi	v Expenses				
Est	timate your ex	xpenses as of yo	our bankrı	uptcy filing date unless y				
	penses as of a plicable date.		oankruptc	y is filed. If this is a supp	olemental Schedule	J, check	the box at the top	of the form and fill in the
app	piicable date.							
Inc	lude expense	es paid for with I	non-cash	government assistance is cluded it on <i>Schedule I:</i>	if you know			
	r value of suc ificial Form 6I		a nave inc	cluded it on Schedule I:	Your Income		Your exp	enses
` -		•						
4.		or home owners nd any rent for the		ses for your residence. I r lot.	nclude first mortgage	e 4.	\$	2,100.00
	If not include	ded in line 4:	Ū					
	4a. Real e	estate taxes				4a.	\$	0.00
		estate taxes erty, homeowner's	s, or renter	's insurance		4a. 4b.		0.00
		•		ıpkeep expenses		4c.	· ·	50.00
		eowner's associat				4d.		0.00
5.	Additional r	mortgage payme	ents for vo	our residence, such as ho	me equity loans	5.	\$	1.000.00

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	tor 1 tor 2	Scott Ko Traci Ko		ase num	ber (if known)	
6.	Utiliti	ies:				
٥.	6a.		heat, natural gas	6a.	\$	350.00
	6b.	Water, sev	wer, garbage collection	6b.	\$	128.00
	6c.	Telephone	e, cell phone, Internet, satellite, and cable services	6c.	\$	300.00
	6d.	Other. Spe	ecify:	6d.	\$	0.00
7.	Food	and house	ekeeping supplies	7.	\$	450.00
8.	Child	care and c	hildren's education costs	8.	\$	0.00
9.	Cloth	ing, laund	ry, and dry cleaning	9.	\$	0.00
10.	Perso	onal care p	roducts and services	10.	\$	0.00
11.	Medic	cal and de	ntal expenses	11.	\$	0.00
12.	Trans	sportation.	Include gas, maintenance, bus or train fare.		_	202.22
			ar payments.	12.	· .	300.00
			clubs, recreation, newspapers, magazines, and books	13.		0.00
			ributions and religious donations	14.	\$	0.00
15.	Insur					
			surance deducted from your pay or included in lines 4 or 20.	45-	φ.	0.00
		Life insura		15a.		0.00
		Health ins		15b.	· · · · · · · · · · · · · · · · · · ·	0.00
		Vehicle ins		15c.		250.00
40			rance. Specify:	_ 15d.	<b>a</b>	0.00
16.	Speci		clude taxes deducted from your pay or included in lines 4 or 20.	16.	¢	0.00
17			ease payments:	_ 10.	Ψ	0.00
17.			ents for Vehicle 1	17a.	\$	614.00
			ents for Vehicle 2	17b.		469.00
		Other. Spe	ocify:	17c.		0.00
		Other. Spe	· · ·	17d.	· ———	0.00
18			of alimony, maintenance, and support that you did not report as	_ '''.	Ψ	0.00
10.			your pay on line 5, Schedule I, Your Income (Official Form 6I).	18.	\$	0.00
19.	Other	r payments	s you make to support others who do not live with you.		\$	0.00
	Speci			19.		<u> </u>
20.	Other	r real prop	erty expenses not included in lines 4 or 5 of this form or on Schedu	ule I: Y	our Income.	
	20a.	Mortgages	on other property	20a.	\$	0.00
	20b.	Real estat	e taxes	20b.	\$	0.00
	20c.	Property, h	nomeowner's, or renter's insurance	20c.	\$	0.00
	20d.	Maintenan	ce, repair, and upkeep expenses	20d.	\$	0.00
	20e.	Homeown	er's association or condominium dues	20e.	\$	0.00
21.	Other	r: Specify:		21.	+\$	0.00
00	V			_		0.044.00
22.		-	xpenses. Add lines 4 through 21.	22.	\$	6,011.00
00			r monthly expenses.			
23.			monthly net income.	220	œ	E 000 00
			12 (your combined monthly income) from Schedule I. monthly expenses from line 22 above.	23a. 23b.	·	5,680.09
	230.	Copy your	monthly expenses from line 22 above.	230.	-φ	6,011.00
	230	Subtract v	our monthly expenses from your monthly income.			
	250.		is your <i>monthly net income</i> .	23c.	\$	-330.91
		o roodit	,			
24.			an increase or decrease in your expenses within the year after you way a support to finish paying for your car loan within the year or do you expect your mor			e or decrease because of a
	modific	cation to the t	erms of your mortgage?			
	■ No	O.				
	□Ye	es.				
	Expla					

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B6 Declaration (Official Form 6 - Declaration). (12/07)

Date May 6, 2015

Date May 6, 2015

#### **United States Bankruptcy Court** Northern District of Illinois

	Scott Koziowski				
;	Traci Kozlowski		Case No.		
		Debtor(s)	Chapter	7	
	DECLARATION C	ONCERNING DEBTO	R'S SCHEDUL	ES	
	2202222				
	DECLARATION LINDER P	PENALTY OF PERJURY BY	INDIVIDITAL DEI	RTOR	
	DECEMBER 1	ENTETT OF TERSORT BT	II (DI (IDO/IL DE)	BTOK	
	I declare under penalty of perjury th	at I have read the foregoing su	mmary and schedul	es, consisting of 26	
	sheets, and that they are true and correct to the				
	•	•	,		

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

Debtor

/s/ Scott Kozlowski

/s/ Traci Kozlowski
Traci Kozlowski
Joint Debtor

Signature

Signature

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B7 (Official Form 7) (04/13)

#### United States Bankruptcy Court Northern District of Illinois

In re	Scott Kozlowski Traci Kozlowski		Case No.	
		Debtor(s)	Chapter	7

#### STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

#### **DEFINITIONS**

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

#### 1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNI	SOURCE
\$96,276.00	2014 Joint Tax Return
\$90,349.00	2013 Joint Tax Returns
\$100,414.00	2012 Joint Tax Return
\$67,026.00	2011 Joint Tax Return

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#### 2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT

**SOURCE** 

#### 3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

a. *Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR DATES OF PAYMENTS

AMOUNT PAID

AMOUNT STILL OWING

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225\*. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATES OF PAYMENTS/ TRANSFERS AMOUNT PAID OR VALUE OF TRANSFERS

AMOUNT STILL OWING

NAME AND ADDRESS OF CREDITOR

IND ADDRESS OF CREDITOR

c. All debtors: List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

AMOUNT STILL OWING

#### 4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT
AND CASE NUMBER
PNC Bank, N.A. v. Scott's Lawn Care of
Plainfield Inc.

NATURE OF PROCEEDING Breach of Contract COURT OR AGENCY
AND LOCATION
Twelfth Judicial Circuit Court, Will

**County Illinois** 

STATUS OR DISPOSITION Judgement for Plaintiff in

the amount of \$94,044.97

Cedar Path Nuseries, LLC v. Scott's Lawn Care of Plainfield, Inc., Docket Number: 11SC6574 Breach of Contract

Judgemnet for the Plaintiff in the amount of \$7,031.00

<sup>\*</sup> Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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CAPTION OF SUIT NATURE OF COURT OR AGENCY STATUS OR AND CASE NUMBER **PROCEEDING** AND LOCATION DISPOSITION Shorewood Home & Auto Inc. v. Scott **Smaill Claims** Twelfth Judicial Circuit Court, Will Judgement Kozlowski, Case Number: 2008SC004007 **County Illinois** 

awarded to Plaintiff for the amount of \$293.40

Homer Industries Inc. v. Scott Kozlowski, Case

#: 2011SC006200

**Smail Claims** 

Twelfth Judicial Circuit Court, Will

**Judgement County Illnois** 

granted to Plaintiff in the amount of \$2,872.48

None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF **PROPERTY** 

## 5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER

DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF **PROPERTY** 

#### 6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN

NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER

DESCRIPTION AND VALUE OF **PROPERTY** 

7. Gifts

None

List all gifts or charitable contributions made within one year immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

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#### 8. Losses

None

List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

#### 9. Payments related to debt counseling or bankruptcy

None П

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within one year immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE

Thinking Outside The Box, Inc. 40 Shuman Blvd. Suite 320 Naperville, IL 60563

DATE OF PAYMENT. NAME OF PAYER IF OTHER THAN DEBTOR 4/3/2015

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY Attorney Fees: \$2,000.00 Filing

Fee: \$335.00

#### 10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

None b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S)

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY

#### 11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

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### 12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY

NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

#### 13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

#### 14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

#### 15. Prior address of debtor

None

If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

## 16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

### 17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DATE OF NOTICE ENVIRONMENTAL LAW

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b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous None

Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME AND ADDRESS

NAME AND ADDRESS OF **GOVERNMENTAL UNIT** 

DATE OF

**ENVIRONMENTAL** 

NOTICE

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF **GOVERNMENTAL UNIT** 

DOCKET NUMBER

STATUS OR DISPOSITION

LAW

#### 18. Nature, location and name of business

None

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpaver identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

> LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO.

(ITIN)/ COMPLETE EIN ADDRESS

**BEGINNING AND** NATURE OF BUSINESS

**ENDING DATES** 

None b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME

NAME ADDRESS

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within six years immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement only if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

#### 19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

## NAME AND ADDRESS

DATES SERVICES RENDERED

None b. List all firms or individuals who within the two years immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME ADDRESS DATES SERVICES RENDERED

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None c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME ADDRESS

None d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was

issued by the debtor within **two years** immediately preceding the commencement of this case.

DATE ISSUED

20. Inventories

NAME AND ADDRESS

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis)

NATURE AND PERCENTAGE

OF STOCK OWNERSHIP

None b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

None

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS

21. Current Partners, Officers, Directors and Shareholders

None

a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns,

controls, or holds 5 percent or more of the voting or equity securities of the corporation.

22. Former partners, officers, directors and shareholders

None

a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME ADDRESS DATE OF WITHDRAWAL

None b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS TITLE DATE OF TERMINATION

TITLE

23. Withdrawals from a partnership or distributions by a corporation

None If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation

in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY Case 15-16226 Doc 1 Filed 05/06/15 Entered 05/06/15 16:23:15 Desc Main Document Page 42 of 58

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### 24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

#### 25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

\*\*\*\*\*

### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date	May 6, 2015	Signature	/s/ Scott Kozlowski	
		-	Scott Kozlowski	
			Debtor	
Date	May 6, 2015	Signature	/s/ Traci Kozlowski	
		C	Traci Kozlowski	
			Joint Debtor	

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

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B8 (Form 8) (12/08)

## **United States Bankruptcy Court Northern District of Illinois**

	Scott Kozlowski			
In re	Traci Kozlowski		Case No.	
		Debtor(s)	Chapter	7

## CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION

PART A - Debts secured by property of the estate (Part A must be fully completed for FACH debt which is secured by

property of the estate. Attach ac		cessary.)
Property No. 1		
Creditor's Name: Ally Financial		Describe Property Securing Debt: 2012 Dodge Challenger - 19,000 miles
Property will be (check one):		
☐ Surrendered	■ Retained	
If retaining the property, I intend to (check a  ☐ Redeem the property  ☐ Reaffirm the debt ☐ Other. Explain	,	oid lien using 11 U.S.C. § 522(f)).
Property is (check one):		
■ Claimed as Exempt		□ Not claimed as exempt
Property No. 2		
Creditor's Name: Green Tree Servicing L		Describe Property Securing Debt: Single family home - 16015 Aberdeen Drive, Lockport, IL 60441
Property will be (check one):		
☐ Surrendered	■ Retained	
If retaining the property, I intend to (check a  ☐ Redeem the property  ☐ Reaffirm the debt ☐ Other. Explain		oid lien using 11 U.S.C. § 522(f)).
Property is (check one):		
Claimed as Exempt		□ Not claimed as exempt

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B8 (Form 8) (12/08)			Page 2	
Property No. 3				
Creditor's Name: Green Tree Servicing L		Describe Property Securing Debt: Single family home - 16015 Aberdeen Drive, Lockport, IL 60441		
Property will be (check one):  ☐ Surrendered	■ Retained			
If retaining the property, I intend to (check a  ☐ Redeem the property  ☐ Reaffirm the debt ☐ Other. Explain		id lien using 11 U.S.C.	. § 522(f)).	
Property is (check one):  Claimed as Exempt		☐ Not claimed as exe	empt	
Property No. 4				
Creditor's Name: Toyota Motor Credit		Describe Property Securing Debt: 2010 Toyota Prius - 100,000 Miles		
Property will be (check one):  ☐ Surrendered	■ Retained			
If retaining the property, I intend to (check a ☐ Redeem the property ■ Reaffirm the debt ☐ Other. Explain		id lien using 11 U.S.C.	. § 522(f)).	
Property is (check one):  ■ Claimed as Exempt		☐ Not claimed as exe	empt	
PART B - Personal property subject to unex Attach additional pages if necessary.)	pired leases. (All three	columns of Part B mus	st be completed for each unexpired lease.	
Property No. 1				
Lessor's Name: -NONE-	Describe Leased Pro	operty:	Lease will be Assumed pursuant to 11 U.S.C. § 365(p)(2):  ☐ YES ☐ NO	

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Page 3

I declare under penalty of perjury that the above indicates my intention as to any property of my estate securing a debt and/or personal property subject to an unexpired lease.

Date	May 6, 2015	Signature	/s/ Scott Kozlowski
	_	_	Scott Kozlowski
			Debtor
Date	May 6, 2015	Signature	/s/ Traci Kozlowski
	_	•	Traci Kozlowski
			Joint Debtor

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## United States Bankruptcy Court Northern District of Illinois

In re	Scott Kozlowski Traci Kozlowski		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPEN	SATION OF ATTOI	RNEY FOR DE	EBTOR(S)	
C	Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016 ompensation paid to me within one year before the filing rendered on behalf of the debtor(s) in contemplation of	of the petition in bankruptcy,	or agreed to be paid	to me, for services rendered or to	
	For legal services, I have agreed to accept		\$	2,000.00	
	Prior to the filing of this statement I have received		\$	2,000.00	
	Balance Due		\$	0.00	
2. T	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3. T	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4. <b>I</b>	I have not agreed to share the above-disclosed compe	nsation with any other person	unless they are mem	bers and associates of my law firm.	
[	☐ I have agreed to share the above-disclosed compensat copy of the agreement, together with a list of the name				
5. I	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:				
b c. d	<ul> <li>Analysis of the debtor's financial situation, and render</li> <li>Preparation and filing of any petition, schedules, state</li> <li>Representation of the debtor at the meeting of creditor</li> <li>Representation of the debtor in adversary proceedings</li> <li>[Other provisions as needed]</li> </ul>	ment of affairs and plan which is and confirmation hearing, a	n may be required; and any adjourned hea		
6. B	By agreement with the debtor(s), the above-disclosed fee	does not include the following	g service:		
		CERTIFICATION			
	certify that the foregoing is a complete statement of any ankruptcy proceeding.	agreement or arrangement for	payment to me for re	epresentation of the debtor(s) in	
Dated:	: _May 6, 2015	/s/ Jon Dowat			
		Jon Dowat 62845 Thinking Outide 40 Shuman Blvd Suite 320 Naperville, IL 605 630-225-9840 Fa	the Box, Inc.		
		thinkingoutside@	comcast.net		



Jon Dowat Attorney at Law

## **Retainer Agreement**

## What to expect from your attorney:

As your attorney my responsibilities are to prepare and file the bankruptcy petition with the Court. Once you retain my office, we will start processing your petition. We will file your petition once the fees are paid in full. My office will handle all creditor calls relating to your bankruptcy. My office will prepare you for your Trustee's meeting (341 hearing) prior to that meeting.

On the day of the hearing, one of our attorneys will appear with you at the 341 hearing. In addition, my office will prepare any reaffirmation agreements for secured creditors, mail documentation to the Trustee, and answer any questions directly relating to the bankruptcy process. Our fee is fully earned and property of Thinking Outside the Box, Inc. at the time in which your petition is completed.

We understand that certain creditors may violate the bankruptcy rules and may try to contact you after your bankruptcy discharge. If this should occur, our office will notify these creditors that they are violating the bankruptcy rules and submit the required documentation to cease collection activities. We will continue to provide this service at no charge up to 60 days after your discharge or plan confirmation.

When your Bankruptcy is closed, my office will mail out the discharge order and close the file. We will mail back original documents and for privacy reasons shred any other personal information in your file. The documents including the original bankruptcy petition will be stored on the bankruptcy Court's secure server and available through the Court's web site.

#### I understand that:

Once your bankruptcy is discharged or confirmed, our contract is concluded. If there is additional work that you may request of my office, a flat fee will be determined at that time. Hearings and Motions related to your bankruptcy are part of your initial fees. Filing Adversary Complaints or motions to modify (after confirmation) are new issues and require additional fees.

// 1

Traci Kozlowski

Scott Kozlowski

Date

Attorney Fee: \$2,000.00

Court Fee: \$335.00

Ion Dowat

# UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

# NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

## 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

## 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

### Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total Fee \$335)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

# <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total Fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over

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Form B 201A, Notice to Consumer Debtor(s)

Page 2

a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

## Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total Fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

## Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total Fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

## 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy forms.html#procedure.

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B 201A (Form 201A) (6/14)

B 201B (Form 201B) (12/09)

## **United States Bankruptcy Court** Northern District of Illinois

In re	Scott Kozlowski Traci Kozlowski		Case No.		
		Debtor(s)	Chapter	7	
	CEDTIFICATION	DE NIOTUCE TO CONICUN	IED DEDTOI	D(G)	

# CERTIFICATION OF NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

## **Certification of Debtor**

I (We), the debtor(s), affirm that I (we) have received and read the attached notice, as required by § 342(b) of the Bankruptcy Code.

Scott Kozlowski Traci Kozlowski	X	/s/ Scott Kozlowski	May 6, 2015
Printed Name(s) of Debtor(s)		Signature of Debtor	Date
Case No. (if known)	X	/s/ Traci Kozlowski	May 6, 2015
		Signature of Joint Debtor (if any)	Date

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

## **United States Bankruptcy Court** Northern District of Illinois

In re	Scott Kozlowski		Case No.	
mic	Traci Kozlowski	Debtor(s)	Chapter	7
	V	ERIFICATION OF CREDITOR N	MATRIX	
		Number o	of Creditors:	64
	The above-named Debtor(sour) knowledge.	s) hereby verifies that the list of cred	itors is true and	correct to the best of my
Date:	May 6, 2015	/s/ Scott Kozlowski		
		Signature of Debtor		
Date:	May 6, 2015	/s/ Traci Kozlowski		
	·	Traci Kozlowski		
		Signature of Debtor		

Academic Endocrine 2001 Gary Ave. Suite 240 Wheaton, IL 60187

Ally Financial 200 Renaissance Ctr Detroit, MI 48243

ARS National Services Inc Re: Citibank, N.A. Citi Mastercard P.O. Box 463023 Escondido, CA 92046

ARS National Services Inc Re: Chase Bank, N.A. P.O. Box 463023 Escondido, CA 92046

Atg Credit 1700 W Cortland St Ste 2 Chicago, IL 60622

Atg Credit 1700 W Cortland St Ste 2 Chicago, IL 60622

ATG Credit LLC PO Box 14895 Chicago, IL 60614-4895

ATG Credit LLC PO Box 14895 Chicago, IL 60614-4895

Bmo Harris Bank P.o. Box 1111 Madison, WI 53701

Cach Llc/Square Two Financial Attention: Bankruptcy 4340 South Monaco St. 2nd Floor Denver, CO 80237

Capital One Na Attn: General Correspondence Po Box 30285 Salt Lake City, UT 84130

Cda/pontiac Attn:Bankruptcy Po Box 213 Streator, IL 61364

Center Pediatric Gastroenterology 777 Oakmont Lane Ste 1600 Westmont, IL 60559

Chase Card 201 N. Walnut St//Del-1027 Wilmington, DE 19801

Chase Card P.o. Box 15298 Wilmington, DE 19850

ChaseHealthAdvance Az1-5734 Po Box 71 Phoenix, AZ 85001

Citibank/The Home Depot Citicorp Credit Srvs/Centralized Bankrup Po Box 790040 Saint Louis, MO 63179

Creditor Cellection Bureau Inc. PO Box 63 Kankakee, IL 60901

Creditors Collection B 755 Almar Pkwy Bourbonnais, IL 60914

Creditors Collection Bureau, Inc 755 Almar Pkwy Bourbonnais, IL 60914

Creditors Discount and Audit Co. 415 East Main Street Streator, IL 61364

Credtrs Coll 755 Almar Pkwy Bourbonnais, IL 60914

Dennis B. Porick, LTD. Attn: Dennis Porick 63 W. Jefferson, Ste 100 Joliet, IL 60432

Discover Fin Svcs Llc Po Box 15316 Wilmington, DE 19850

DuPage Valley Anesthisia PO Box 3872 Carol Stream, IL 60132

Green Tree Servicing L Po Box 6172 Rapid City, SD 57709

Green Tree Servicing L Po Box 6172 Rapid City, SD 57709

Harvard Collection Harvard Collection Services 4839 N Elston Avenue Chicago, IL 60630

Health Care Centers of Morris Hosp. Central Billing Office 25259 S. Reed St. Channahon, IL 60410

Homer Industries Inc. 13920 Archer Ave. Lockport, IL 60441 Joliet Open MRI PO Box 843 Wheaton, IL 60187

Joliet Radiological SC 36910 Treasury Center Chicago, IL 60694

Komyatte & Casbon Attn: Collections Department 9650 Gordon Drive Highland, IN 46322

Komyatte & Casbon, P.C. Re: Pathology Consultant Inc 9650 Gordon Dr. Highland, IN 46322

Laboratory and Pathology Diagnostic Dept 4387 Carol Stream, IL 60122

Lvnv Funding Llc Po Box 10497 Greenville, SC 29603

Lvnv Funding Llc Po Box 10497 Greenville, SC 29603

M3 Financial Services Re: Univ. Cicago Medicine PO Box 7230 Westchester, IL 60154

Med Business Bureau Po Box 1219 Park Ridge, IL 60068

Medical Recovery Specialists LLC 2250 Devon Ave Ste 352 Des Plaines, IL 60018

MiraMed Revenue Group Dept 77304 Po Box 77000 Detroit, MI 48277

Morris Hospital 150 West High Street Morris, IL 60450

Naperville Radiologists, S.C. 6910 S. Madison Street Willowbrook, IL 60527

Nationwide Credit & Collections Re: Meridian Medical Assoc. PO Box 3159 Oak Brook, IL 60522-3159

Nelnet Lns Po Box 1649 Denver, CO 80201

Nelnet Lns Po Box 1649 Denver, CO 80201

Pathology Consultants, Inc PO Box 30309 Charleston, SC 29417-0309

Pellettieri 991 Oak Creek Dr Lombard, IL 60148

PNC PO Box 1820 Dayton, OH 45401

Portfolio Recovery Attn: Bankruptcy Po Box 41067 Norfolk, VA 23541 Portfolio Recovery Attn: Bankruptcy Po Box 41067 Norfolk, VA 23541

Portfolio Recovery Attn: Bankruptcy Po Box 41067 Norfolk, VA 23541

Presence St. Joseph Medical Center Patient Finanical Services 1643 Lewis Ave., Ste 203 Billings, MT 59102-4151

Presence St. Joseph Medical Center Patient Finanical Services 1643 Lewis Ave., Ste 203 Billings, MT 59102-4151

Presence St. Joseph Medical Center Patient Finanical Services 1643 Lewis Ave., Ste 203 Billings, MT 59102-4151

Sears/cbna Po Box 6283 Sioux Falls, SD 57117

Shorewood Home & Auto Inc. 1002 W. Jefferson St. Shorewood, IL 60404

Silver Cross Hospital 7008 Solution Center Chicago, IL 60677

Td Bank Usa/targetcred Po Box 673 Minneapolis, MN 55440

The Affiliated Group I Po Box 7739 Rochester, MN 55903 Toyota Motor Credit 1111 W 22nd St Ste 420 Oak Brook, IL 60523

University of Chi Medicine 15965 Collections Center Dr. Chicago, IL 60693-0159

Univrsty of Chicago Physicans Group 75 Remittance Dr., Ste 1385 Chicago, IL 60675-1385

Weltman Weinberg Reis Co. 180 North LaSalle Street Suite 2400 Chicago, IL 60601